

**WORK FIRST PROGRAM  
 BENEFIT DIVERSION AND SERVICES FOR LOW INCOME FAMILIES SURVEY  
 STATE FISCAL YEAR (SFY) 2025-2026**

County Name: \_\_\_\_\_

1. **Benefit Diversion:** Will your county offer Benefit Diversion to Work First applicants for SFY 2025-2026?

- Yes**  **No**

**Work First Services for Low Income Families:** Which Federal Poverty Level (FPL), will your county utilize for SFY 2025-2026 (Refer to [Poverty Guidelines / ASPE](#) for the 2025 FPL)?

- 150% of the FPL**  **200% of the FPL**

**Comments (optional):** \_\_\_\_\_

\_\_\_\_\_  
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\_\_\_\_\_/\_\_\_\_\_  
 (Signature of Program Manager) (Printed Name) Date

\_\_\_\_\_/\_\_\_\_\_  
 (Signature of DSS Director) (Printed Name) Date

If a response is not received by the established deadline the county will be automatically designated as offering Benefit Diversion and providing Services for Low Income Families at 200% of the FPL. Surveys should be submitted no later than March 17, 2025, via email to [Work.First.Policy.Team@dhhs.nc.gov](mailto:Work.First.Policy.Team@dhhs.nc.gov).